

## Major Incident Reporting

Form will automatically complete:

Agency Name & NTD ID Number, Submission time and date

Incident Number

Mode

Service Type



Date and Time of Incident

Day

Select Month



Select Day



Select Year



Time

Select Hour



:

Select Minutes



AM/PM



Select Time Zone



Standard/DST



Incident Location

City

Select State



Station Name, Route, or Street

Consequences of Incident:

Fatalities

Number



Major Injuries

Number



Transit  
Passengers

Number



Transit  
Employees

Number



Contractors

Number



Trespassers

Number



Others

Number



Estimated

Property Damage (\$):

Vehicles Involved:

Revenue Vehicles

Select Number



Non-Revenue Vehicles

Select Number



Other Vehicles

Select Number



Vehicle 1 type

Select vehicles involved



Vehicle 1 Description

Vehicle 2 type

Select vehicles involved



Vehicle 2 Description

Incident Categorization:

Primary Event

☐ Collision

Collision Detail

☐ Personal Casualty

Personal Casualty Detail

☐ Security Incident

Security Incident Detail

☐ Derailment

Select Location



☐ Evacuation

Evacuation Detail

☐ Fire

Fire Event Detail

☒ Vehicle Leaving Roadway

Possible Secondary Events

☐ Derailment

☐ Evacuation

☐ Fire

☐ Vehicle Leaving Roadway

Select Location



Evacuation Detail

Fire Event Detail

Additional Detail

Select alignment type



Select grade crossing controls



Select intersection controls



Description of Incident:

Actions of Others Involved:

Passenger(s) actions relevant to incident (describe)

Other individual(s) actions relevant to incident (describe)

Other vehicle(s) actions relevant to incident (describe)

Actions or Existing Conditions

Select All Existing Conditions that Apply

Environmental Conditions:

Weather Select weather conditions



Traffic

Medium



Lighting

Dark



Right of Way/Roadway Conditions

Select conditions



Right of Way/Roadway Configuration

Select configuration



Right of Way/Roadway Type

Select right of way/roadway type



Other Notifications Made (if applicable)

☐ National Transportation Safety Board (NTSB)

☐ Rail State Safety Oversight Agency

☐ FRA

☐ US Coast Guard

Contact Information for Person Reporting Incident

Name

Title

Phone

Email